FORM D

## UNITED STATES

SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 2054

OMB Number: 3235-0076 Expires: December 31, 1993 hours per form:... 16.00

FORM D

**ORIGINAL** 

NOTICE OF SALE OF SECUE PURSUANT TO REGULATION WINSON SECTION 4(6), AND/OR NANCIAL

SEC	USE ONL	Υ	
Prefix	<u> </u>	Serial	
DAT	E RECE	IVED	
		1	

UNIFORM LIMITED OFFERING EXEMPTION DATE RECEIVED								
Name of Offering ( check if this is an amendment and name has changed, and indicated change.)  PAOLA PRODUCTION JOINT VENTURE								
Filing Under (Check box(es) that apply: ☐ Rule 504 ☐ Rule 505 ☐ Rule 506 ☐ Section 4(6) ☐ ULOE Type of Filing: ☐ Amendment								
A. BASIC IDENTIFICATION DATA								
1. Enter the information requested about the issuer								
Name of Issuer ( check if this is an amendment and name has changed, and indicated change)  PAOLA PRODUCTION JOINT VENTURE								
Address of Executive Offices (Number and Street, City, State, Zip Code) 9330 Amberton Parkway, Suite #1260, Dallas, Texas 75243  Telephone Number (Including Area Code) (214) 593-0100								
Address of Principal Business Operations (Number and Street, City, State, Zip Code)  (if different from Executive Offices)  Telephone Number (Including Area Code)								
Brief Description of Business: A Texas joint venture organized topurchase working interestsor drill 52 oil & gas wells in Franklin and Miami Counties, Kansas.								
Type of Business Organization    corporation   limited partnership, already formed   other (please specify) Fractional Undivided								
business trust limited partnership, to be formed Working Interest								
Actual or Estimated Date of Incorporation or Organization:    Month   Year								
CN for Canada; EN for other foreign jurisdiction)								
GENERAL INSTRUCTIONS: Federal:								
Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).								
When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities & Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.								
Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, DC 20549.								
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.								
Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.								
Filing Fee: There is no federal filing fee.								
State:								
This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.								

ATTENTION: Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a bss of an available state exemption unless such exemption is predicated on the filing of a federal notice.



## A. BASIC IDENTIFICATION DATA

Enter the information requested for the following:

- Each promoter of the issuer, if the issuer has been organized within the past five years;
- Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
- Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
- Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	■ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/o Managing Partno
Full Name (Last name first, if	individual)				
Nueces Valley Resource	s, Inc.		<u> </u>		
Business or Residence Address 9330 Amberton Parkway	7		ie)		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	■ Executive Officer	■ Director	☐ General and/o Managing Partne
Full Name (Last name first, if	individual)				
Burrell, George C.					
Business or Residence Addre	ss (Number and	Street, City, State, Zip Coo	ie)		
9330 Amberton Parkway	v, Suite#1260, Da				
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	■ Executive Officer	■ Director	☐ General and/o Managing Partn
Full Name (Last name first, if	findividual)				
Havens, Charles					
Business or Residence Addre	ss (Number and	Street, City, State, Zip Coo	de)		
9330 Amberton Pa	rkway, Suite#12	60, Dallas, Texas 75243	· · · · · · · · · · · · · · · · · · ·		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	■ Executive Officer	■ Director	☐ General and/ Managing Partn
Full Name (Last name first, if	findividual)				
Cunningham, Jane					<del> </del>
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	de)		
9330 Amberton Parkwa	ay, Suite#1260, I	Dallas, Texas 75243			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/ Managing Partn
Full Name (Last name first, it	f individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zip Coo	de)		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/ Managing Partn
Full Name (Last name first, in	f individual)	. <del>.</del>			
		0 0 0 0 0	<u></u>		<del></del>
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co.	ue)		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

		-		B. INF	ORMATI	ON ABO	UT OFFI	ERING				
		<del></del>									Yes N	
		1 1		م مه اسمیسا	all to non	acoradita	d invactor	e in this of	fering?			0 ■
1. Has th	he issuer sol	d, or does t	ne issuer	intena to s ver also in	en, to non	-accreune	a mvestor	s iii iiiis Vi s undar I li	OF	.,		_
			Ansv	ver also in	Appendix	t, Column	2, 11 mmg	g under Or	JOIS.			
2. What	is the minin	nım invest	ment that	will be acc	ented fror	n anv indi	vidual?					\$35,000
3. Does	the offering	nermit ioir	nt ownersh	in of a sin	ole unit?						- 	Yes N
. Does	the offering	permit jon	it owners.	np or a sin	5.0 a						i	
a pers states broke	the inform nission or si son to be lis s, list the na er or dealer,	milar remu sted is an a me of the you may se	neration for ssociated broker or et forth the	or solicitat person or dealer. If	ion of pur agent of a more tha	chasers in broker or n five (5)	connection dealer register to the connection of	on with sa gistered w o be listed	les of secu ith the SE	irities in tl C and/or	ne offering with a stat	g. If e or
Full name	(Last name	first, if ind	ividual)									
Business o	or Residence	·		_						<u></u>		
Name of A	Associated B	roker or De	ealer			<del></del>			<u>-</u> .			
States in V	Which Person	n Listed Ha	s Solicite	d or Intend	ls to Solic	it Purchas	ers	<del></del>		_		_
	ck "All State										. 🗖 Ali	States
[AL]		[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]		[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT		[NV]	[NH]	[[[]]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	= -	JSDJ	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full name	(Last name	first, if ind	ividual)				· .		<u> </u>		<del></del>	
Business of	or Residence	<u> </u>	<u>.                                    </u>		•					<u> </u>	·-·	<del></del>
Name of A	Associated B	roker or D	ealer						<del></del> ,			
States in V	Which Perso	n Listed He	as Solicite	d or Intend	ls to Solic	it Purchas	ers			<u>-</u> .		
	eck "All Sta					□ All						
(Ch		[AZ]	[AR]	(CA)	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
•	-	[AZ]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[IL]			[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[M]		[NV]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
[RI]	[SC]	]SD]	[114]	[17]	[01]	[,,]	[ • • • • •	[,,,,,]	[]	[]		
Full name	(Last name	first, if ind	lividual)									
Business	or Residence	<del></del>	<u></u> _	<del></del> -					· <del></del>			
Name of A	Associated F	Broker or D	ealer	. <del></del> .				_	<u>.</u>		<del></del>	<del></del>
States in V	Which Perso	n Listed H	as Solicite	d or Inten	ds to Solic	it Purchas	ers	<u> </u>	<del>-</del> -	·	<del></del>	
	eck "All Sta											
(ell		[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]		[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[M]	-	[NV]	[NH]	[NJx	[NM]	[NY]	[NC]	[ND]	[ОН]	[OK]	[OR]	[PA]
LE L		ISDI	ITNI	TTX1	ניייין וניטו	IVTI	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary).

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE C	OF PROCEEDS	
	Enter the aggregate offering price of securities included in this offering and the total amount alreadine or "zero." If the transaction is an exchange offering, check this box \(\sigma\) and indicate in the co-curities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$	\$
	Equity	\$	\$
	□ Common □ Preferred		
	Convertible Securities (including warrants)	\$	S
	Partnership Interests	\$	\$
	Other (Specifyjoint venture interests)	\$1,190,000	\$
	Total	\$1,190,000	\$
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchasers on the total lines. Enter "0" if answer is "none" or "zero."		
	Accredited Investors	Number Investors	Aggregate Dollar Amount of Purchases
	Non-accredited Investors.	-	
	Total (for filings under Rule 504 only)		
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		
		Number Investors	Aggregate Dollar Amount of Purchases
	Type of offering Rule 505		of rulellases
	Regulation A		
	Rule 504		
			-
	Total		
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fee		
	Printing and Engraving Costs	•	\$4,000

\$15,000

\$142,000

\$166,000

\$5,000

Legal Fees.....

Accounting Fees.....

Engineering Fees....

Sales Commissions (Specify finders' fees separately).....

Total.....

Other expenses (identify) ..... Syndication Costs.....

	C. OFFERING PRICE, NU	MBER OF INVESTORS, EXPENSES AND U	SE O	F PROCEEDS		
•	I and total expenses furnished to	e aggregate offering price given in response to Par response to Part C - Question 4.a. This differ."	eren	ce is the	<u>\$1,</u> 0	<u>924,000</u>
5.	each of the purposes shown. If the and check the box to the left of the	justed gross proceeds to the issuer used or propos amount for any purpose is not known, furnish an e estimate. The total of the payments listed must eq suer set forth in response to Part C - Question 4.b	estim ual	ate		
		·		Payments to Officers, Directors, & Affiliates		Payments to Others
	Salaries and fees Management Fees		_	\$ 47,600		\$
	Purchase of real estate		_			\$
	Purchase, rental or leasing and insta	llation of machinery and equipment		\$		\$
		ngs and facilities		\$		\$
	offering hat may be used in exchan	luding the value of securities involved in this ge for the assets or securities of another	_			_
				\$		\$
	Repayment of indebtedness			\$		\$
	Other (specify) Re-working 21 wells	s, drill 8 water injection wells, drill 7 wells	_	\$640,000		\$
	Column Totals		_	\$1,024,000		\$
	Total Payments Listed (column tota	Is added)		<b>■\$1</b> ,024	4,000	
		D. FEDERAL SIGNATURE		<u> </u>		
followir	ng signature constitutes an undertaking	signed by the undersigned duly authorized pers to by the issuer to furnish to the U.S. Securities and er to any non-accredited investor pursuant to para	Exc	hange Commissi	on, up	
Issuer	(Print or Type)	SIGNATURE	1	DATE	,	1
PAO	LA Production Joint Venture	Junge ( Burnell			38 /	2007
Name	of Signer (Print or Type)	Title of Signer (Print or Type)		./	/	
GEO	RGE C. BURRELL	President, Nueces Valley Resources, Inc., the	Join	t Venture Mana	ger	

ATTENTION
Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001).

F.,	STATI	E SIGNATURE	

1. Is any party described in 17 CFR 230.252(c), (d), (e) or (f) presently subject to any of the disqualification provisions Yes No of such rule?

See Appendix, Column 5, for state response.

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.
- The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature	Date
PAOLA Production Joint Venture	George C/ Swall	11/30/2001
Name of Signer (Print or Type)	Title of Signer (Print or Type)	
GEORGE C. BURRELL	President, Nueces Valley Resources, Inc., the Joint V	enture Manager

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

	•				APPENDIX					
1	2	3 4						5		
	investor	accredited rs	Type of security and aggregate offering price offered in State (Part C - Item 1)	purchased in	Type of investor and amount purchased in this State (Part C - Item 2)					
State	Yes	No	Joint Venture Interests	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No	
AL										
AK										
AZ										
AR		1								
CA										
СО		1								
СТ										
DE										
DC										
FL										
GA										
НІ										
ID										
IL									_	
IN				·						
IA										
KS										
KY								<u> </u>		
LA										
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MI										
MN										
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МО										
MT										
NE										
NV										

					APPENDIX				
1	ż		3	4	5				
	Intend to sell Type of to non-accredited and agg investors offering in State offered		Type of security and aggregate offering price offered in State (Part C - Item 1)	Type of inve purchased in (Part C - Ite		under S ULOE (if yes, explans waiver			
State	Yes	No	Joint Venture Interests	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
NH								_	<u> </u>
NJ									
NM							<u> </u>		
NY		<u> </u>							<del> </del>
NC									
ND									
ОН									
OK								<u> </u>	
OR									
PA									
RI				ļ					
SC	ļ								
SD									
TN									
TX									
UT									
VT									
VA									
WA									
WV									
WI									
WY									
PR		1							

